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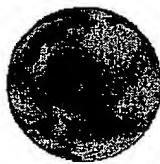
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HYBRIDOMA-BROKERAGE

for

Mouse Monoclonal Antibodies

For Institutes in Various Countries Worldwide



offers over 250 hybridomas

producing monoclonal antibodies against nuclear, cytoplasmic, membrane and soluble antigens of
human and animal cells

at reasonable prices to

BIOTECH FIRMS

also offers to buy hybridomas

producing useful diagnostic antibodies from researchers and their institutes or universities.

CATALOGUE OF MOUSE HYBRIDOMAS



BIOPROBE BV

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ER-receptor	<u>AER303</u>	Nu	aa495-595	G2a-k
ER-receptor	<u>AER304</u>	Nu	aa120-179	G1-k
ER-receptor	<u>AER308</u>	Nu	aa282-339	G1-l
ER-receptor	<u>AER310</u>	Nu	aa495-595	G2a-k
ER-receptor	<u>AER314</u>	Nu P+E	aa120-170 B ; MVP*	G1-l
ER-receptor	<u>AER311</u>	Nu P	aa495-595 E/F	G2a-k
ER-receptor	<u>AER315</u>	Nu	aa340-500	G1-k
ER-receptor	<u>AER317</u>	Nu	aa500-595 ; MVP*	G2a-k
ER-receptor	<u>AER320</u>	Nu	aa495-595	G2a-k
MVP	<u>1011</u>	Nu	Major Vault Protein	G1
MVP	<u>1014</u>	Nu	Major Vault Protein	G1
MVP	<u>1027</u>	Nu P	Major Vault Protein	M
MVP	<u>1032</u>	Nu	Major Vault Protein	G1
Ku	<u>Ku15</u>	Nu	Prot. Kin on DNA	G1
WAF1/p21	<u>WA-1</u>	Nu P	Cycle Prot.	G1
p34.cdc2	<u>POH-1</u>	Nu P	Cycle Prot.	G2a
Prolif. Antigen	<u>IPO-38</u>	Nu	Proliferation marker	M
p53	<u>BP53.12</u>	Nu P+E	Suppr., C-term. epit	G2a
p53	<u>Pab122</u>	Nu E	Suppr., N-term. epit	G2b-k
p105(PANA)	<u>2B3</u>	Nu P	Proliferation marker	M
p13	<u>BM-3</u>	Nu	Early Myel. mark.	G1

Lewis x	(See CD15)			
Lewis y	A70-C/C8	Me P	Carbohydrate	M
S-Lewis-a TD6	<u>121SLE</u>	Me P	Carbohydrate	M
H-type 2	<u>19-OLE</u>	Me P+A	Bloodgroup	M
H-type 2	<u>A63-D/B12</u>	Me A	Bloodgroup A1/A2	M
H-type 5&6	<u>HE-182</u>	Me P+A	Bloodgroup	M
MUC-1 TD4	<u>VU-3-D1</u>	Mu P	Epit:-RPAP-	G1-k
MUC-1 TD4	<u>VU-3-C6</u>	Mu P	Epit:-RPAP-	G1-k
MUC-1 TD4	<u>VU-4-H5</u>	Mu P	Epit:-RP-	G1-k
MUC-1 TD4	<u>VU-11-D1s</u>	Mu P	Epit:-DTRP-	G1-k
MUC-1 TD4	<u>VU-11-E2</u>	Mu P	Epit:-PDTRP-	G1-k
MUC-1 TD4	<u>VU-12-E1</u>	Mu P	Epit:-PDTRPAP-	G1-k
MUC-1	<u>VU-4-C2</u>	Mu P	Epit:	G1-k
MUC-1	<u>VU-2-G7</u>	Mu P	Epit:	G1
MUC-5AC	<u>1-13M1</u>	Mu P	Epitope: a(glycopept.)	G1
MUC-5AC	<u>2-11M1</u>	Mu P	Epitope: b(glycopept.)	G1
MUC-5AC	<u>2-12M1</u>	Mu P	Epitope: c(glycopept.)	G1
MUC-5AC	<u>9-13M1</u>	Mu P	Epitope: d(glycopept.)	G1
MUC-5AC	<u>58M1</u>	Mu P	Epitope: f(core)	G1
MUC-5AC	<u>45M1</u>	Mu P	Epitope: g(core)	G1-k
RBP	<u>G4E4</u>	So	Retinol Binding Prot.	G1-k
Thyroglob.	<u>2H11</u>	So P	Epitope: 1(interspecies)	G1
Thyroglob.	<u>6E1</u>	So P	Epitope: 2(human)	G1-k
ACTH	<u>2F6</u>	So P	Aden Cort. Horm.	G1
PLAP	<u>F5C2</u>	So	Plac. Alk. Phos	G1-k
PLAP	<u>H7E8</u>	So	Plac. Alk. Phos	G2a-k
AFP	<u>MBS12</u>	So	alphafetoprotein	G1
AFP TD2	<u>C3</u>	So P	epitope D	G2a-k
AFP TD2	<u>C2</u>	So	epitope B	G1-k
AFP TD2	<u>D10</u>	So	epitope A	G1-k
Insulin	<u>E2-E3</u>	So P	Hum./Swine/Bov.	G1-k
Insulin	<u>2D11-H5</u>	So P	2nd epitope	G1-k
LHRH-receptor	<u>A9E4</u>	Me P	GnRH receptor	G1
LHRH-receptor	<u>F1G4</u>	Me	GnRH receptor	G1
IFN-a2	<u>N39</u>	So	Interferon alpha 2	G1-k
IFN-a2	<u>N27</u>	So	Interferon alpha 2	G1-k
IFN-a1	<u>2-48</u>	So	Interferon alpha 1	G1-k
IFN-a1	<u>2-52</u>	So	Interferon alpha 1	G1-k
IFN-g	<u>G-23</u>	So	Interferon gamma	G1-k
IFN-g	<u>G-30</u>	So	Interferon gamma	G2b-k
TNF α	<u>4C6-H8</u>	So P	Tum. Necrosis Fact.	G1
TNF α	<u>CBTNFa</u>	So	Tum. Necrosis Fact.	G1
TGF α	<u>1E8-G6</u>	So	TGF alpha	G1
MHC I	<u>BRA-23/9</u>	Me	HLA	G2a
MHC I	<u>CATA-1</u>	Me	HLA-A25+A32	G2a
MHC I	<u>108-2C5</u>	Me	HLA-A monomorf	G1

MHC I	JOAN-1	Me	HLA-B monomorf	G1
MHC II	<u>BRA-FB6</u>	Me P	HLA-DP	G2b
MHC II	<u>SPV-L3</u>	Me P+Facs	HLA-DQ	G2a
MHC II	<u>BRA-30</u>	Me P+Facs	HLA-DR	G2a
MHC II	<u>LN-3</u>	Me P+Facs	HLA-DR	G2b
MHC II	<u>BRA-14</u>	Me P	HLA-DP+DR	G3
Human IgG	<u>ICO97</u>	Facs	Immunoglob. heavy ch.	G1
Human IgM	<u>ICO30</u>	Facs	Immunoglob. heavy ch.	G1
Human IgA	Hisa43	Me P	Immunoglob. heavy ch.	G1
Kappa	<u>L1C1</u>	So P	Immunoglob. light ch.	G1
Lambda	<u>ICO106</u>	So Facs	Immunoglob. light ch.	G1
TCR-V β 8	<u>CDVβ8-G</u>	So Facs	Human V β 8 Chain	G1
CD1	<u>66IIC7</u>	Me	T6	G2a
CD1	<u>RIV12</u>	Me	T6	G
CD1a	<u>CBT6</u>	Me	T6	G1
CD1b IV	<u>100-1A5</u>	Me	T6	M
CD3	<u>B-B12</u>	Me Facs	T cell rec. complex	G1-k
CD3	<u>RIV9</u>	Me	T cell rec. complex	G3
CD3 III	<u>CRIS-7</u>	Me	T cell rec. complex	G2a
CD4	<u>RIV6</u>	Me	MHC.II rec. HIV-rec.	G2a-k
CD4	<u>JOU4B7F4</u>	Me	MHC.II rec. HIV-rec.	M
CD4	<u>RIV7</u>	Me Facs	MHC.II rec. HIV-rec.	G2a
CD4 II	<u>EDU-2</u>	Me	MHC.II rec. HIV-rec.	G2a
CD5	<u>NKI-CD5</u>	Me Facs	T1, leu-1, Ly-1	M-k
CD5 I	<u>CRIS-1</u>	Me	T1, leu-1, Ly-1	G2a
CD5	<u>B-B8</u>	Me Facs	T1, leu-1, Ly-1	G1
CD6	<u>SPV-L14</u>	Me P+Facs	T12	G1
CD7 IV	<u>124-1D1</u>	Me	gp40	G1
CD8	<u>RIV11</u>	Me Facs	MHC I rec.	G1
CD8a IV	<u>143-44</u>	Me	MHC I rec.	G1
CD10	<u>FR4D11</u>	Me	Calla	G1
CD10	<u>ICO124</u>	Me Facs	Calla	G1
CD10	<u>CB-CALLA</u>	Me Facs	Calla	G1
CD11a IV	<u>DF1524</u>	Me Facs	aL integrin, LFA-1	G2b-k
CD11a II	<u>CRIS-3</u>	Me	aL integrin, LFA-1	G2b
CD13	<u>B-F10</u>	Me	Aminopeptidase N.	G1-k
CD14	<u>B-A8</u>	Me	GPI-linked glycoprot.	G1
CD15 IV	<u>BRA-4F1</u>	Me	Facs Lewis x	M
CD15	<u>FR4A5</u>	Me	Lewis x	M
CD16	<u>CB-16</u>	Me Facs	FcRy III	G1
CD18 III	<u>68-5A5</u>	Me Facs	LFA-1, integrin-2	G2a
CD19	<u>CB19</u>	Me Facs	Pan B cell	G1
CD20 V	<u>B9E9</u>	Me Facs	Pan B cell	G2a
CD20 III	<u>93-1B3</u>	Me	Pan B cell	G1
CD20 IV	<u>109-3C2</u>	Me	Pan B cell	G3
CD21	<u>FR5A10</u>	Me Facs	C3d, EBV rec.	G1

CD22	<u>FR10B4</u>	Me Facs	BL-CAM, hairy cells	G1
CD22	<u>MYG13</u>	Me	BL-CAM, hairy cells	G1
CD22	<u>ICO91</u>	Me	BL-CAM, hairy cells	G1
CD25 IV	<u>143-13</u>	Me	IL-2 receptor, Tac	G1
CD25	<u>ICO105</u>	Me	IL-2 receptor, Tac	G1
CD26 VI	<u>202-36</u>	Me	Peptidase	G2b
CD27 VI	<u>203-6</u>	Me	Costimulatory mol.	G3
CD29	<u>Moon-4</u>	Me	gp11a	G1-k
CD31 IV	<u>158-2B3</u>	Me Facs	PECAM-1	G1
CD31	<u>FS12</u>	Me Facs	PECAM-1	G1
CD34	<u>ICO115</u>	Facs	Blast cells	G1
CD36	<u>1A7</u>	Me Facs	PgpIV (IIIb)	G2b-k
CD36	<u>1E8</u>	Me	PgpIV (IIIb)	G1-k
CD36 VI	<u>185-1G2</u>	Me	PgpIV (IIIb)	G2a
CD37	<u>IPO24</u>	Me	TM4 fam. gp52-40w	G2b-k
CD38	<u>AT1</u>	Me P+Facs	T10	G1-k
CD38	<u>AT2</u>	Me P	T10	G3-k
CD38	<u>FS02</u>	Me	T10	G1
CD41a III	<u>96-2C1</u>	Me	GPIIb/IIIa	G1
CD43a IV	<u>DFT1</u>	Me P	Leukosialin	G1-k
CD43b V	<u>BRA-7G</u>	Me P	Leukosialin	M
CD43 III	<u>84-3C1</u>	Me Facs+P	Leukosialin	G1
CD44 IV	<u>DF1485</u>	Me P	Pgp-1, H-CAM	G1-k
CD44 V	<u>156-3C11</u>	Me Facs+P	Pgp-1, H-CAM	G2a
CD44 IV	<u>33-3B3</u>	Me	Pgp-1, H-CAM	G2a
CD45 IV	<u>136-4B5</u>	Me Facs+P	LCA, T200	G1
CD45 IV	<u>135-4C5</u>	Me Facs+P	LCA, T200	G2b
CD45RA V	<u>158-4D3</u>	Me Facs+P	LCA, T200	G2a
CD45RB V	<u>DFB1</u>	Me P	LCA, T200	G3-k
CD45RB V	<u>BRA-11G</u>	Me P	LCA, T200	G1-k
CD45RB IV	<u>BRA-55</u>	Me P	LCA, T200	G1
CD46 VI	<u>197-2B1</u>	Me	MCP	G2a
CD48 VI	<u>156-4H9</u>	Me	Blast-1	G1
CD50	<u>ICO60</u>	Me Facs	ICAM-3	G2a
CD50 V	<u>101-1D2</u>	Me Facs+P	ICAM-3	G1
CD50 VI	<u>186-2G9</u>	Me Facs+P	ICAM-3	G2b
CD53 VI	<u>161-2</u>	Me	Pan Leuk., Blast-1	G2a
CD53.1 V	<u>63-5A3</u>	Me	Pan Leuk., Blast-1	G2b
CD54	<u>1H4</u>	Me	ICAM-1	G2b-k
CD54	<u>F4-31C2</u>	Me	ICAM-1	G1
CD55	<u>F4-29D9</u>	Me	Decay Acc. Factor	G1-k
CD55 IV	<u>143-30</u>	Me Facs+P	Decay Acc. Factor	G1
CD56	<u>123C3</u>	Me P	NCAM	G1
CD56	<u>123A8</u>	Me	NCAM	G1
CD56	<u>2MN-2B7</u>	Me	NCAM	M
CD57	<u>NK-1</u>	Me P	HNK-1	M
CD59 VI	<u>193-27</u>	Me	Protectin, MIRL, P18	M

CD66e	<u>A1</u>	Me	CEA (NCA)	G1
CD66e	<u>B2</u>	Me	CEA (NCA)	G1
CD66e	<u>CB30</u>	Me P	CEA (NCA)	G1
CD71	<u>66IG10</u>	Me	Transferrin Rec.T9	G1-k
CD71 IV	<u>DF1513</u>	Me P+Fac	Transferrin Rec.T9	G1-k
CD74 IV	<u>LN-2</u>	Me P	MHC II or Ig	G1
Cdw75 IV	<u>LN-1</u>	Me P	Neur. sens. carbo.	M
Cdw78 IV	<u>DF1588</u>	Me	Leu 21, Ba antigen	G1-k
Cdw78	<u>IPO10</u>	Me P	Leu 21, Ba antigen	G3
CD81 VI	<u>1.3.3.22</u>	Me	TAPA-1, B-cells G1	G1
CD84 VI	<u>152-1D5</u>	Me	73KD, GRG, BPC#6	G1
CD95	<u>B-R18</u>	Me	FAS	G1
CD98	<u>IPO-T10</u>	Me	4F2, monocytes	M
CD100 VI	<u>133.1G6</u>	Me	150kD, GR3, 5T-005	M
CD106	<u>B-K9</u>	Me	VCAM-1	G1
CD147	<u>CB43</u>	Me	50-50kD	M-k

HPV 16	<u>13E2</u>	E6		
HPV 16	<u>4B12</u>	E6		
HPV 16	<u>1D9</u>	E6		
HPV 16	<u>2F5</u>	E6		
HPV 18	<u>4G3</u>	E6 (E6*-18-1)		
HPV 18	<u>3G5</u>	E6 (E6*/E6-18-2)		
HIV-1	<u>CB-qp120</u>	Me	gp120	G1
p55; 50	<u>1108-1</u>	P	EBV early antig.	G1
Rabies	<u>Rab-50</u>	E	Neutralising	G2b-k
Filaria	<u>GMU-WES-7*</u>		Secretory Protein	G1
Bov Alb.	<u>A23-A/D3</u>		High affinity	G2a
Mouse Thy-1	<u>IBL-1</u>		Thymocytes	G2b
Mouse Thy-1	<u>IBL-6/13</u>		Thymocytes	G-k
Mouse MHC-II	<u>IBL-5/22</u>		I-A region	G-k
Mouse CD8a	<u>IBL-3/25</u>		MHC I rec.	G-k
Mouse CD45	<u>IBL-5/25</u>		LCA, T200	G-k
FITC	<u>F4/1</u>		(Second antibody)	G1-k
HRPO	<u>V3.5</u>		Horse Radish Peroxidase	
AP	<u>V17.3</u>		Alkaline Phosphatase	
Penicillin	<u>Pen 9</u>		(Second antibody)	G1-k
BrdU	<u>Mobu-1</u>	P	BromodeoxyUridin	G1-k

A=Agglutination, Cy=Cytoplasm, E=Elisa, Facs=Flow Cytometry, M=Mucin, Ma=Matrix, Me=membrane, Nu=Nucleus, P=Paraffin, TD=Characterized in TD Workshops, I-VI=CD Workshops

- * Co-precipitates the Major Vault Protein
 - * Owned by Gajah Mada University, Yogyakarta, Indonesia
-

Dear Potential Client of BioProbe <jhilgers@indosat.net.id>

BioProbe is the only Private Company offering cell lines rather than the antibodies. We are in this business for over 12 years now and our Catalogue or Listing <http://www.bioprobe.web.id> contains almost 300 hybridomas now, all producing mouse antibodies and mostly against human tissue antigens. We have an important collection of antibodies against CD antigens, keratins and mucins, carbohydrate antigens etc. Our growth is with an average of 30 clones per year.

Our business strategy has changed somewhat over the years. While in the early years we sent out samples for testing, before making a royalty contract, send the clone and get paid, a process taking months and sometimes even more than a year, nowadays things have been simplified. And the prices have come down to a very cost-effective level, albeit in a non-exclusive setting. The usual price is \$ 1000,- per clone, less in package deals.

Upon an order we ship one ampoule of cells (mycoplasma-free) on Monday or Tuesday of the next week. So we take a risk. However, we ask the client to also pay within one month and the invoice comes along with the shipment on dry ice. If the order is a larger package we do not charge the full price, but in case of one or a few clones we do. So the client takes a risk too.

The client has to produce some supernatant – either in-house or elsewhere (upon request we can send with the clone some of our sups, not QC'd but free of charge, in order to speed up analysis) in order to generate enough antibody to test its usefulness, mostly for immunohistology en Flow cytometry, sometimes for other applications such as in Elisa's or on magnetic beads. If the antibody does not perform as expected, the client can tell us and we ship another clone free of charge.

For some small companies it is unattractive to pay upfront before they can earn their money back. In such cases we may send a package of say 20 clones and demand monthly payments of say \$ 1000,-. But this is to our discretion only and not usual. Royalty contracts are not involved and actually most of these clones are free from royalties payable to the sources, but not all. So there is no paperwork and no administration - over 5-10 years - involved in these deals.

The products range from Golden Oldies to New Ones never on the Market before and usually originate from University Departments with a few clones only, not worthwhile to commercialize directly, on a scale warranting the effort, except via us. Our clones/antibodies are often bought to fill up gaps in certain series of antibodies also by the leaders in the Market. You may find our older ones actually in quite a few competitor's catalogues, but remarkably the clones are sold better by everyone – the big as well as the small companies - if the antibody appears more frequently in publications. And the Market is still growing.

We have no dissatisfied customers any longer, because of the simplicity and honesty of the way we have come to conduct this business: with both parties taking a risk simultaneously from the start of the relationship. In the beginning sometimes both us and the client got upset because a sample did not seem to match the clone, which actually was never really the case in all our 12 years of existence, but always the fault of the client, getting different results, or so they thought between the sample and the in-house produced antibody. Or analysis took so long, we started to be impatient about a possible deal.

In a new year, once you are our customer, you may start looking first at our new products in the beginning of that year, when the budgets for acquisition have been made, before you start looking elsewhere (at Research Institutes with license clones out), where it takes time, administration, often more money for you to acquire hybridomas. Of course certain exclusive clones should be the main attraction of your catalogue, but not to grow and fill up gaps continuously is of course bad tactics. Often exclusive clones are eventually bought together with nonexclusive ones by satisfied customers. Especially if they are known all over the World as being appropriate antibodies for, say immunostaining of paraffin tissue and tumor sections.

Dr. J. Hilgers, President

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